



Please type a plus sign inside this box +

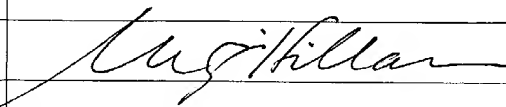
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-002
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/494,332	
	Filing Date	January 28, 2000	
	First Named Inventor	Kevin M. Gorman	
	Group Art Unit	1634	
	Examiner Name	Jeanine A. Goldberg	
Total Number of Pages in This Submission	3	Attorney Docket Number	2094/1E285US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	DARBY & DARBY P.C. Paul F. Fehlner, Ph.D. - 35,135
Signature	 MARIE GILFILLAN 44085
Date	March 13, 2003

Express Mail Label No. _____	Dated: 3/13/03 2094094187 US
------------------------------	------------------------------



03-14-03

AFI/600
RECEIVED
MAR 20 2003
TECH CENTER 1600/2900

PTO/SB/17 (10-02)
Approved for use through 10/31/2002. OMB 0651-0032

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 430.00

Complete if Known

Application Number	09/494,332
Filing Date	January 28, 2000
First Named Inventor	Kevin M. Gorman
Examiner Name	Jeanine A. Goldberg
Group Art Unit	1634
Attorney Docket No.	2094/1E285/US1

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account

Deposit Account Number: 04-0100

Deposit Account Name: Darby & Darby P.C.

The Commissioner is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	520.00
1252	400	2252	200	Extension for reply within second month	
1253	920	2253	460	Extension for reply within third month	
1254	1,440	2254	720	Extension for reply within fourth month	
1255	1,960	2255	980	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	320.00
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,280	2453	640	Petition to revive - unintentional	
1501	1,280	2501	640	Utility issue fee (or reissue)	
1502	460	2502	230	Design issue fee	
1503	620	2503	310	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Sheet	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	740	2810	370	For each additional invention to be examined (37CFR 1.129(b))	
1801	740	2801	370	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	740	2001	370	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	510	2003	255	Plant filing fee	
1004	740	2004	370	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims: ** = x =

Independent Claims: ** = x =

Multiple Dependent: =

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					0.00

**or number previously paid, if greater. For Reissues, see above

Other fee (specify)

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 840.00

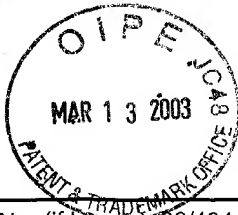
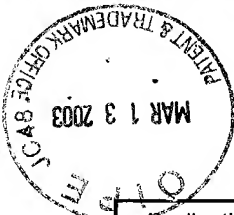
SUBMITTED BY

Name (Print/Type): Paul F. Fehlner, Ph.D. Registration No. (Attorney/Agent): 35,135 Telephone: (212) 527-7665

Signature: *Marie Gilfillan* 44085 Date: March 13, 2003

MARIE GILFILLAN

Complete (if applicable)



Application No. (if known): 09/494,332

Attorney Docket No.: 209441E285US1

RECEIVED
MAR 10 2003
TECH CENTER 1600/2900

Certificate of Mailing Under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 294034187 US in an envelope addressed to:

Commissioner for Patents
Washington, DC 20231

on March 13, 2003
Date

RECEIVED

MAR 18 2003

Technology Center 2600

D. Davis

Signature

D. Davis

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

1. NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND I INTERFERENCES
2. FEE TRANSMITTAL FOR FY 2003
3. TRANSMITTAL FORM
4. PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(A)
5. CHECK NO. 11323 IN THE AMOUNT OF \$520.00 AND CHECK NO. 11324 IN THE AMOUNT OF 320.00.

RECEIVED
MAR 18 2003
TECHNOLOGY CENTER 2800

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)
2094/1E285US1



In re Application of Kevin M. Gorman, et al

Application Number
09/494,332

Filed
January 28, 2000

For: OLIGONUCLEOTIDE PRIMERS FOR EFFICIENT MULTIPLEX
DETECTION OF HEPATITIS C VIRUS (HCV) AND HUMAN
IMMUNODEFICIENCY VIRUS (HIV) AND ...

Group Art Unit 1634

Examiner Jeanine A. Goldberg

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$	
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	520.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$	

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record.

☒ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 35,135

March 13, 2003

Date

Marie Gilfillan
Signature MARIE GILFILLAN
for Paul F. Fehlner, Ph.D.
Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☒ 1 forms are submitted.

03/17/2003 MBIZUNES 00000049 09494332

01 FC:1253

520.00 DP

Express Mail Label No.

Dated: 3/13/03 294034187-us